

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>06/02/07</i>
O.I.P.E. CLASSIFIER	<i>PH</i>		<i>6/10</i>
FORMALITY REVIEW	<i>NL</i>	<i>553</i>	<i>7/18/00</i>
RESPONSE FORMALITY REVIEW	<i>LH</i>	<i>60105</i>	<i>4-24-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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